

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3						
4		1				
5						
6		1				
7						
8		1				
9						
10						
11						
12		1				
13						
14		1				
15						
16		1				
17		2				
18		2				
19		2				
20		1				
21		1				
22		2				
23		1				
24		1				
25		1				
26		1				
27		1				
28		1				
29		1				
30		1				
31		1				
32		1				
33		1				
34		1				
35		1				
36		1				
37		1				
38		1				
39		1				
40		1				
41		2				
42		1				
43		2				
44		2				
45		2				
46		2				
47		2				
48		2				
49		2				
50		2				
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	CLAIMS					
	IND	DEP	IND	DEP	IND	DEP
51		2				
52		1				
53		1				
54		1				
55		1				
56		1				
57		1				
58		1				
59		1				
60		1				
61		1				
62		1				
63		1				
64		1				
65		1				
66		1				
67		1				
68		1				
69		1				
70		1				
71		1				
72		1				
73		1				
74		1				
75		2				
76		2				
77		2				
78		2				
79		2				
80		2				
81		2				
82		2				
83		1				
84		1				
85		1				
86		2				
87		1				
88		1				
89		1				
90		1				
91		1				
92		1				
93		1				
94		1				
95		1				
96		1				
97		1				
98		1				
99		1				
100		1				
TOTAL IND.		9				
TOTAL DEP.						
TOTAL CLAIMS						

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
101		1				
102		1				
103		1				
104		1				
105		2				
6		2				
7		2				
8		1				
9		1				
10		2				
11		2				
12		2				
13		2				
14		2				
15		2				
16		1				
17		1				
18		1				
19		1				
20		2				
21		2				
22		2				
23		1				
24		1				
25		2				
26		2				
27		2				
28		2				
29		2				
30		2				
31		2				
32		1				
33		1				
34		2				
35		2				
36		2				
37		2				
38		2				
39		2				
40		2				
41		2				
42		2				
43		1				
44		1				
45		2				
46		2				
47		2				
48		14				
49		2				
50		2				
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	IND		DEP		IND		DEP		IND		DEP	
	IND	DEP										
151			2									
152			1									
153			1									
154			1									
55			1									
56			62									
57			2									
158			2									
59			2									
60			2									
61			2									
62			2									
63			2									
64			2									
65			2									
66			2									
67			2									
68			2									
69			2									
70			2									
71			2									
72			2									
73			2									
74			2									
75			2									
76			2									
77			2									
78			2									
79			2									
80			2									
81												
82												
83												
84												
85												
86												
87												
88												
89												
90												
91												
92												
93												
94												
95												
96												
97												
98												
99												
100												
TOTAL IND.			9									
TOTAL DEP.			327									
TOTAL CLAIMS			336									